FORM D

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549



FORM D
NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

	OMB API	PROVAL	
Expires: Estimate	mber:ed average er form	April 3 burden	0, 2008
	SEC US	E ONLY	
Prefix			Serial
	<u> </u>	1	
	DATE RE	CEIVED	
	I	1	

Name of Offering (check if this is an amendmen	t and name has changed, and indic	cate change.)	
Issuance of shares of K2 Overseas Investors I, Ltd.			
Filing Under (Check box(es) that apply):	ule 504 🔲 Rule 505	☑ Rule 506 □	Section 4(6) MULOE
Type of Filing: New Filing 🔲 Ar	mendment		RECEIVED
	A. BASIC IDENTIFICATIO	N DATA	AUG 2 3 2006
1. Enter the information requested about the issuer			AUGAG
Name of Issuer	and name has changed, and indica	ate change.	17/13/52
K2 Overseas Investors I, Ltd.			185/6/
Address of Executive Offices:	(Number and Street, 0	City, State, Zip Code)	Telephone Number (Including Area Code)
c/o Maples Finance BVI Ltd., Kingston Chambers, P.	O. Box 173, Road Town Tortolu,	BVI	
Address of Principal Offices	(Number and Street, (City, State, Zip Code)	Telephone Number (Including Area Code)
(if different from Executive Offices)			
Brief Description of Business: The company is struct correlation and reduced volatility.	ured as a multi-manager fund fo	rmed to seek superior	investment returns with low market
Type of Business Organization	• •		
	☐ limited partnership, already for	med 🗀 o	other (please specify) AUG 2 4 2 4 2 5 5
☐ business trust	☐ limited partnership, to be formed	ed	COM
,	Month	Year	HOMSON
Actual or Estimated Date of Incorporation or Organization	on: 0 3	0 0	Actual Estimates
Jurisdiction of Incorporation or Organization: (Enter two	-letter U.S. Postal Service Abbrevia	ation for State;	
	CN for Canada; FN for o		FN

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Flequired: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.



\$3. C			A. BASIC II	DENTIFICATION DAT	A	
2. E	Each beneficial own Each executive office	ne issuer, if the iss ner having the pov cer and director o	suer has been organized wi wer to vote or dispose, or di		of, 10% or more of ging partners of pa	a class of equity securities of the issuer; rtnership issuers; and
Check	Box(es) that Apply:	☑ Promoter	☐ Beneficial Owner	Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Na	ame (Last name first, i	if individual): K2/	D&S Management Compa	ıny, LLC		
Busine	ess or Residence Add	ress (Number and	Street, City, State, Zip Cor	de): 300 Atlantic Street, 12	2 th Floor, Stamford	d, Connecticut 06901
Check	Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or Managing Partner
Full Na	ame (Last name first, i	if individual): Do u	ıglass III, William A.			
	ess or Residence Add			de): c/o K2/D&S Managem	ent Company, LL	.c
	Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or Managing Partner
Full Na	ame (Last name first, i	if individual): Sau	nders, David C.		· · · · · · · · · · · · · · · · · · ·	
	ess or Residence Add			de): c/o K2/D&S Managem	ent Company, LL	.c
	Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Na	ame (Last name first, i	if individual): Chr	istie, Stephanie			
	ess or Residence Add			de): c/o K2/D&S Managem	ent Company, LL	.c
	Box(es) that Apply:	☐ Promoter	Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Na	ame (Last name first,	if individual): Oil	Casualty Investment Corp	poration, Ltd.		
Busine	ess or Residence Add	ress (Number and	Street, City, State, Zip Co-	de): P.O. Box HM 1751, Ha i	milton GX, Bermı	ıda
Check	Box(es) that Apply:	☐ Promoter	Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Na	ame (Last name first, i	if individual):				
Busine	ess or Residence Add	ress (Number and	d Street, City, State, Zip Co	de):		
Check	Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Na	ame (Last name first,	if individual):				
Busine	ess or Residence Add	ress (Number and	Street, City, State, Zip Co.	de):		
Check	Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner
Full Na	ame (Last name first,	if individual):				
Busine	ess or Residence Add	ress (Number and	d Street, City, State, Zip Co	de):		
Check	Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

1. I	las the issue	r sold, or o	does the is	suer inten			edited inve bendix, Col					☐ Yes	⊠ No
2. \	What is the m	inimum in	vestment t	hat will be	accepted	from any i	ndividual?					\$1	,000,000*
*sub	ject to redu	ction at th	ne sole dis	cretion of	f the Boar	d of Direc	tors						
3. [Does the offe	ring permi	t joint own	ership of a	single uni	t?						⊠ Yes	s 🗆 No
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	any commiss offering. If a												
	and/or with a associated pe												
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				,						, .			
Busin	ess or Resid	ence Addr	ess (Numb	er and Str	eet, City, S	State, Zip (Code)	3333 Pea	achtree Ro	oad, NE, S	Suite 150,	Atlanta, Ge	eorgia 30326
Name	of Associate	d Broker o	or Dealer				•						
	in Which Pe Check "All S												☐ All States
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Full N	ame (Last na	ıme first, if	findividual) GS	Capital M	anageme	nt, LLC			2002			
Busin	ess or Resid	ence Addr	ess (Numb	er and Str	eet, City, S	State, Zip (Code)	3343 Pea	achtree Ro	oad, NE, 1	445 East	Tower, Atla	anta, Georgia, 30326
	ess or Resid			er and Str	eet, City, S	State, Zip (Code)	3343 Pea	achtree Ro	oad, NE, 1	1445 East	Tower, Atla	anta, Georgia, 30326
Name		ed Broker o	or Dealer	cited or In	tends to Se	olicit Purch	nasers				1445 East	Tower, Atla	
Name	of Associates in Which Pe	ed Broker o	or Dealer	cited or In	tends to Se	olicit Purch	nasers				1445 East	Tower, Atla	anta, Georgia, 30326
Name States	of Associates in Which Pe Check "All Si	ed Broker of erson Liste eates" or ch	or Dealer d Has Soli neck individ	cited or In	tends to Se	olicit Purch	nasers						
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B. INFORMATION ABOUT OFFERING

3 of 9

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	oes the offe	- .	-		•							⊠ Yes	i □ No
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Full N	ame (Last na	ame first, if	individual) Hig	hland Info	ormation (Services,	Inc.					
Busin	ess or Reside	ence Addr	ess (Numb	er and Str	eet, City, S	State, Zip (Code)	2545 Hig	hland Av	enue, Sui	te 200, Bir	mingham,	Alabama 35205-2420
Name	of Associate	ed Broker o	or Dealer										
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Full N	ame (Last na	ame first, if	individual)									
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Full N	ame (Last na	ıme first, if	individual)									
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☐ [RI		☐ [SD]	[TN]	□ [TX]	□ [UT]	[VT]	□ [VA]	[WA]	□ [WV]	[WI]	□ [WY]	☐ [PR]	
				(Use blai	nk sheet, d	or copy an	d use addi	tional copi	es of this s	sheet, as r	ecessary)		

B. INFORMATION ABOUT OFFERING (cont'd)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Aggregate Amount Already Type of Security Offering Price Sold Debt \$ Equity\$ ☐ Common ☐ Preferred Convertible Securities (including warrants) Partnership Interests.....\$ Other (Specify) 500,000,000 472,564,830 500,000,000 Total..... 472,564,830 Answer also in Appendix, Column 3, if filing under ULOE Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Number Dollar Amount of Purchases Investors Accredited Investors Non-accredited Investors n/a n/a 0 \$ Answer also in Appendix, Column 4, if filing under ULOE If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1. Types of **Dollar Amount** Type of Offering Security Sold Flule 505 n/a n/a Regulation A n/a Rule 504 n/a \$ n/a n/a n/a Total a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees...... Printing and Engraving Costs. 148,228 1,130,000 Accounting Fees..... Engineering Fees.

Total

28,100

1,306,328

Other Expenses (identify) _

4	b.Enter the difference between the aggregate offering p and total expenses furnished in response to Part C—Quigross proceeds to the issuer."	estion 4.a. This difference is th	e "adjusted			<u>\$</u>	498,6	93,672
5	Indicate below the amount of the adjusted gross proceed used for each of the purposes shown. If the amount for estimate and check the box to the left of the estimate. The adjusted gross proceeds to the issuer set forth in re-	ds to the issuer used or propos any purpose is not known, furr The total of the payments listed	ed to be nish an must equal	Óff Dire	nents to ficers, ctors &			nents to
			_	Aff	iliates	_		thers
	Salaries and fees			\$	0		\$	0_
	Purchase of real estate			\$	0		\$	0
	Purchase, rental or leasing and installation of ma	• • • •		\$	0		\$	0
	Construction or leasing of plant buildings and factorial Acquisition of other businesses (including the value offering that may be used in exchange for the as	lue of securities involved in this sets or securities of another iss	suer	\$	0		\$	0
	pursuant to a merger			\$			<u>\$</u>	
	Repayment of indebtedness			3	0		\$ • 498	<u> </u>
	Working capital			\$	0			<u>,093,0</u> 12 0
	Other (specify):			\$	0		\$	0
	Orlinga Table			\$	0		\$ 6 6 9 8	,693,672
	Column Totals Total payments Listed (column totals added)			\$	0 ⊠ \$4°	⊠ 38 4	93,67	
by	s issuer has duly caused this notice to be signed by the isstitutes an undertaking by the issuer to furnish to the U. the issuer to any non-accredited investor pursuant to parties (Print or Type)	Securities and Exchange Co	mmission, up	on written re	quest of its st	aff, the	information	n furnished
	Overseas Investors I, Ltd.	040	V			-	t 23,	2006
Na	me of Signer (Print or Type) phanie Christie	Title of Signer (Print or Type Director)	· · · · · ·	·····			
		ATTENTION			 ,			
	Intentional misstatements or omiss	sions of fact constitute federa	al criminal vi	olations. (Se	ee 18 U.S.C.	1001.)		
		 						

E.	STATE SI	GNATURE	
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1. Is any party described in 17 CFR 230.252(c), (d), (e) or (f) presently subject to any of the disqualification provisions of such rule?

See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature	Date
Overseas Investors I, Ltd.	NAU X	August 23, 200
Name of Signer (Print or Type)	Title of Signer (Print or Type)	
Stephanie Christie	Director	
·		

Instruction:

Κ2

Print the names and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manual not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

				АР	PENDIX			1. 194.	
1	2	2	3			4		5	i
	to non-a	I to sell ccredited s in State – Item 1)	Type of security and aggregate offering price offered in state (Part C – Item 1)		Type of i amount purc (Part C		Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E – Item 1)		
State	Yes No Shares			Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL		х	\$500,000,000	7	\$37,532,448	. 0	0		Х
AK									
AZ		х	\$500,000,000	1	\$6,210,000	0	0		Х
AR									
CA		х	\$500,000,000	2	\$1,769,251	0	0		х
со		. х	\$500,000,000	2	\$1,185,000	0	0		х
СТ		х	\$500,000,000	1	\$6,200,000	0	0		х
DE									
DC		х	\$500,000,000	3	\$12,770,000	0	0		х
FL		х	\$500,000,000	6	\$11,718,000	0	0		х
GA		Х	\$500,000,000	1	\$1,000,000	0	0		Х
н									
ID							•		
IL		×	\$500,000,000	2	\$1,550,000	0	0		Х
IN		Х	\$500,000,000	2	\$1,262,225	0	0		Х
IA									
KS		Х	\$500,000,000	2	\$7,066,000	0	0		Х
KY									
LA		×	\$500,000,000	1	\$3,000,000	0	0		х
ME									
MD		х	\$500,000,000	3	\$14,000,000	0	0		х
MA				·				,	
MI		х	\$500,000,000	3	\$6,450,000	0	0		х
MN									
MS	.,	х	\$500,000,000	7	\$16,900,000	0	0		×
МО		X	\$500,000,000	1	\$25,000,000	0	0		x
MT			,						
NE									
NV									
NH									
NJ		x	\$500,000,000	1	\$537,459	0 -	0		X
NM									

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	to non-a	I to sell ccredited s in State – Item 1)	Type of security and aggregate offering price offered in state (Part C – Item 1)		Type of investor and Amount purchased in State (Part C – Item 2)				
State	Yes	No	Shares	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
NY		х	\$500,000,000	15	\$81,026,993	0	0		Х
NC		х	\$500,000,000	5	\$13,474,761	0	0		х
ND									
ОН		x	\$500,000,000	4	\$4,564,363	0	0		х
ок									
OR		х	\$500,000,000	2	\$7,575,000	0	0		Х
PA		×	\$500,000,000	2	\$12,237,166	0	0		х
RI									
sc		x	\$500,000,000	1	\$1,710,000	0	0		х
SD									
TN									
TX		x	\$500,000,000	5	\$45,197,599	0	0		Х
UT									
VT									
VA		Х	\$500,000,000	1	\$1,700,000	0	0		X
WA		х	\$500,000,000	1	\$2,400,000	0	0		х
wv									
WI			·						
WY									
Non		x	\$500,000,000	15	\$148,528,564	0	0		Х

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